POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	8*(signature)*	7058	2/3/00
O.I.P.E. CLASSIFIER		10	2-29-00
FORMALITY REVIEW	*(signature)* TF	69416	4-1-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

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If more than 150 claims or 10 actions
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